

**State of Minnesota****District Court**

County

Judicial District: \_\_\_\_\_

Court File Number: \_\_\_\_\_

Case Type: \_\_\_\_\_

Domestic Abuse

In the Matter of:

\_\_\_\_\_  
Petitioner

vs.

\_\_\_\_\_  
Respondent**Affidavit and Order for Publication  
or Alternate Service  
(Minn. Stat. § 518B.01, subd. 8)****Affidavit**

Petitioner, being sworn/affirmed under oath, states:

1. ☐ An attempt at personal service made by the sheriff was unsuccessful because Respondent is avoiding service, and a copy of the Petition and Order for Hearing has been mailed to Respondent.

**OR**

- ☐ I do not know the Respondent's address.

2. The last known location of Respondent is: \_\_\_\_\_

3. My most recent contact with Respondent was: \_\_\_\_\_

4. The last known location of Respondent's employment was: \_\_\_\_\_

5. The names and locations of respondent's parents, siblings, children, and other close relatives are:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. a. The names and locations of other persons likely to know Respondent's whereabouts are:

\_\_\_\_\_

- b. I have made the following efforts to locate these persons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Therefore, I request that the Court allow publication or alternate service of the Notice of Hearing. I further request that the Court set a new hearing date, if necessary, and keep the Ex Parte Order for Protection in effect until the hearing.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature (Sign only in front of notary public or court administrator.)

Name: \_\_\_\_\_

Sworn/affirmed before me this

Address: \_\_\_\_\_

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

City/State/Zip: \_\_\_\_\_

\_\_\_\_\_  
Notary Public \ Deputy Court Administrator

Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

### Order

Based on the above affidavit, IT IS HEREBY ORDERED:

- 1a. ☐ Notice shall be given by publication once each week for two weeks (14 days) as provided in Minn. Stat. § 645.11.
- 1b. ☐ Service is to be made by first class mail, forwarding address requested, to the following address: \_\_\_\_\_  
\_\_\_\_\_
2. The date set for hearing in the Order for Domestic Abuse hearing is continued.
3. The Respondent shall personally appear before the Court at \_\_\_\_\_  
(Address)  
on \_\_\_\_\_ at \_\_\_\_\_ .m.  
(Date) (Time)
4. The Ex Parte Order for Protection is extended in full force and effect until the next hearing.
5. ☐ Other: \_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Judge of District Court

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### Distribution

\_\_\_\_\_ Certified copy or original - Return to Court Administrator with Affidavit of Personal Service attached

\_\_\_\_\_ Copy for Petitioner(s)

\_\_\_\_\_ Copy for Respondent(s)

\_\_\_\_\_ Copy for file until original returned

\_\_\_\_\_ Copy for local police department

\_\_\_\_\_ Copy for Sheriff

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_ Dissolution File

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